102/289



Potential persons who are to respond to the collection of information contained in this form are not required to respond unless the form displays a currently valid (6/99) OMB control number.

ATTENTION

Failure to file notice in the appropriate states will not result in a loss of the federal exemption. Conversely, failure to file the appropriate federal notice will not result in a loss of an available state exemption state exemption unless such exemption is predicated on the filing of a federal notice.

FEB 1 2 2004

UNITED STATES
SECURITIES AND EXCHANGE COMMISSION DE Washington, D.C. 20549

OMB APPROVAL

OMB Number: 3235-0076

Expires: May 31, 2005

FORM D

PROCESSED

Estimated average burden hours per response... I

FEB 13 2004

NOTICE OF SALE OF SECURITIES PURSUANT TO REGULATION D,
SECTION 4(6), AND/OR
UNIFORM LIMITED OFFERING EXEMPTION

SEC USE ONLY

Prefix

Serial

DATE RECEIVED

Name of Offering (check if this is an amendment and name has changed, and indicate change.)						
Filing Under (Check box(es) that [X]Rule 504 [] Rule 505 [] Rule 506 [] Section 4(6) apply):	[] ULOE					
Type of Filing: [X] New Filing [] Amendment						
A. BASIC IDENTIFICATION DATA						

m

. Enter the information requested about the issuer	******
Name of Issuer (check if this is an amendment and name has changed, and indicate change.)	
GALACTIC GAMING, INC.	on a summer or
Address of Executive Offices (Number and Street, City, State, Zip Code) Telephone Number Including Area Code)	
James McClay	
230 Spring Street	
Greensboro, N.C.	in con a later and an
Address of Principal Business Operations (Number and Street, City, State, Zip Code) Telephone Number (Including Area Code) (if different from Executive Offices)	
Briof-Bosoription-of-Business	and offensives area with a pur-
The Company is engaged in the public entertainment industry in the production of videos and contests.	
Type of Business Organization	
X] corporation [] limited partnership, already formed [] other (please spec	ify):
] business trust [] limited partnership, to be formed	
Month Year	
Actual or Estimated Date of [10] [1995] [x] Actual [] Estimated ncorporation or Organization:	
Jurisdiction of Incorporation or Organization: (Enter two-letter U.S. Postal Service abbreviation for State: CN for Canada; FN for other foreign jurisdiction) [NV]	
	-

GENERAL INSTRUCTIONS

Federal:

Who Must File: All issuers making an offering of securities in reliance on an exemption under Regulation D or Section 4(6), 17 CFR 230.501 et seq. or 15 U.S.C. 77d(6).

When to File: A notice must be filed no later than 15 days after the first sale of securities in the offering. A notice is deemed filed with the U.S. Securities and Exchange Commission (SEC) on the earlier of the date it is received by the SEC at the address given below or, if received at that address after the date on which it is due, on the date it was mailed by United States registered or certified mail to that address.

Where to File: U.S. Securities and Exchange Commission, 450 Fifth Street, N.W., Washington, D.C. 20549.

Copies Required: Five (5) copies of this notice must be filed with the SEC, one of which must be manually signed. Any copies not manually signed must be photocopies of manually signed copy or bear typed or printed signatures.

Information Required: A new filing must contain all information requested. Amendments need only report the name of the issuer and offering, any changes thereto, the information requested in Part C, and any material changes from the information previously supplied in Parts A and B. Part E and the Appendix need not be filed with the SEC.

Filing Fee: There is no federal filing fee.

State:

This notice shall be used to indicate reliance on the Uniform Limited Offering Exemption (ULOE) for sales of securities in those states that have adopted ULOE and that have adopted this form. Issuers relying on ULOE must file a separate notice with the Securities Administrator in each state where sales are to be, or have been made. If a state requires the payment of a fee as a precondition to the claim for the exemption, a fee in the proper amount shall accompany this form. This notice shall be filed in the appropriate states in accordance with state law. The Appendix in the notice constitutes a part of this notice and must be completed.

A. BASIC IDENTIFICATION DATA

2. Enter the information requested for the following:

- Each promoter of the issuer, if the issuer has been organized within the past five years;
- Each beneficial owner having the power to vote or dispose, or direct the vote or disposition of, 10% or more of a class of equity securities of the issuer;
- Each executive officer and director of corporate issuers and of corporate general and managing partners of partnership issuers; and
- Each general and managing partner of partnership issuers.

Check Box(es) that Apply		[X] Beneficial Owner	[x] Executive Officer	[x]Director []	General and/or Managing Partner			
Full Name	(Last name first	if individual)						
James Mc	Clay							
230 No. S	230 No. Spring St., Greensboro, NC. 27101							
Business	or Residence Ad	dress (Number a	nd Street, City, St	ate, Zip Code)				
Check Box(es) that Apply	:	[X] Beneficial Owner	[x] Executive Officer	[x] Director []	General and/or Managing Partner			
	(Last name first	, if individual)						
Richard G	reene							
Business	or Residence Ad	dress (Number a	nd Street, City, St	ate, Zip Code)				
230 No. S	pring St., Green	sboro, NC. 2710	01					
Check Box(es) that Apply	[] Promoter [x] Beneficial Owner	[x] Executive Officer	[x] Director [] General and/or Managing Partner			

(Use blank sheet, or copy and use additional copies of this sheet, as necessary.)

B. INFORMATION ABOUT OFFERING

1. Has the issu investors in th		•	s the iss	suer inte	end to s	eli, to no	on-accn	dited		Ye: [3	No [X	1
	1	Answer	also in <i>l</i>	Appendi	ix, Colu	mn 2, if	filing ur	nder UL	DE.				
2. What is the individual?							-	•••••	••••		\$25	0.00	_
3. Does the off unit?		-		•	_				••••	Ye:	8]	No [X]	ı
4. Enter the information requested for each person who has been or will be paid or given, directly or indirectly, any commission or similar remuneration for solicitation of purchasers in connection with sales of securities in the offering. If a person to be listed is an associated person or agent of a broker or dealer registered with the SEC and/or with a state or states, list the name of the broker or dealer. If more than five (5) persons to be listed are associated persons of such a broker or dealer, you may set forth the information for that broker or dealer only.													
Full Name (Las	st name	first, if	individu	ıal)									
N/A													
Business or Residence Address (Number and Street, City, State, Zip Code)													
Name of Associ	Name of Associated Broker or Dealer												
States in Which Person Listed Has Solicited or Intends to Solicit Purchasers													
(Check "All Sta	ates" or	check i	ndividu	al State	s)	•••••			[] A	II Sta	ites	
[AL] [AK]	[AZ]	[AR]	[CA]	[CO]	[СТ]	[DE]	[DC]	[FL]	[GA]	[HIJ	[ID]	,
[IL] [IN]	[IA]	[KS]	[KY]	[LA]	[ME]	[MD]	[MA]	[MI]	[MN]	ſ	MS]	[MO	1

[MT]	[NE]	[NV]	[NH]	[NJ]	[NM]	[NY]	[NC]	[ND]	[OH]	[OK]	[OR]	[PA]
[RI]	[SC]	[SD]	[TN]	[ТХ]	[UT]	[VT]	[VA]	[WA]	[WV]	[WI]	[WY]	[PR]

Full Name (Last name first, if individual)

N/A

Business or Residence Address (Number and Street, City, State, Zip Code)

Name of Associated Broker or Dealer

States in Which Person Listed Has Solicited or Intends to Solicit Purchasers

[AR] [CT] [AL] [AK] [AZ] [CA] (x) [DE] [DC] [FL] [GA] [HI] [ID] [CO] [KS] [IN] [IA] [KY] [LA] [ME] [MD] [MA] [MI] [MN] [MS] [MO] [MT] [NE] [NV] [NH] [NJ] [NM] [NY] [NC] [ND] [HO] [OK] [OR] [PA] [RI] [VA] [SC] [SD] [TN] [עד] [WA] [WV] [WY] [PR]

Full Name (Last name first, if individual)

Business or Residence Address (Number and Street, City, State, Zip Code)

Name of Associated Broker or Dealer

States in Which Person Listed Has Solicited or Intends to Solicit Purchasers

[AL]	[AK]	[AZ]	[AR]	[CA]	[CO]	[CT]	[DE]	[DC]	[FL]	[GA]	[HI]	[ID]
[IL]	[IN]	[AI]	[KS]	[KY]	[LA]	[ME]	[MD]	[MA]	[MI]	[MN]	[MS]	[MO]
[MT]	[NE]	[NV]	[NH]	[NJ]	[MM]	[NY]	[NC]	[ND]	[OH]	[OK]	[OR]	[PA]
[RI]	[SC]	[SD]	[TN]	[TX]	[UT]	[VT]	[VA]	[WA]	[WV]	[WI]	[WY]	[PR]

(Use blank sheet, or copy and use additional copies of this sheet, as necessary.)

C. OFFERING PRICE, NUMBER OF INVESTORS, EXPENSES AND USE OF PROCEEDS

1. Enter the aggregate offering price of securities included in this offering and the total amount already sold. Enter "0" if answer is "none" or "zero." If the transaction is an exchange offering, check this box " and indicate in the columns below the amounts of the securities offered for exchange and already exchanged.

Aggregate Offering Price \$1,000,000 in this offering Pri

Type of Security	Aggregate Offering Price	Amount Already Sold
Debt	N/A	\$
Equity	\$1,000,000	\$125,000
[X] Common [] Preferred		
Convertible Securities (including warrants)	\$	\$
Partnership Interests	\$	\$
N/A		
Other (Specify N/A)	\$	\$
Totai	\$1,000,000.00	\$125,000.00

2. Enter the number of accredited and non-accredited investors who have purchased securities in this offering and the aggregate dollar amounts of their purchases. For offerings under <u>Rule 504</u>, indicate the number of persons who have purchased securities and the aggregate dollar amount of their purchases on the total lines. Enter "0" if answer is "none" or "zero."

	Number Investors	Aggregate Dollar Amount of Purchases
Accredited Investors	3	<u>\$125,000.00</u>
Non-accredited Investors	0	\$0
Total (for filings under Rule 504 only)	8	\$125,000.00
Anguar also in Annondix Column 4 if filing undo	r III OE	

3. If this filing is for an offering under <u>Rule 504</u> or <u>505</u>, enter the information requested for all securities sold by the issuer, to date, in offerings of the types indicated, in the twelve (12) months prior to the first sale of securities in this offering. Classify securities by type listed in Part C-Question 1.

Type of offering	Type of Security	Dollar Amount Sold		
Rule 505	N/A	\$0		
Regulation A	N/A	\$0		
Rule 504	N/A	\$0		
Total	N/A	\$0		

	Affiliates	
Salaries and fees	[X] \$	[X] <u>\$</u>
Purchase of real estate	[]\$	[]\$
Purchase, rental or leasing and installation of machinery and equipment	[]\$	[X] \$
Construction or leasing of plant buildings and facilities	[]\$	[X] \$
Acquisition of other businesses (including the value of securities involved in this offering that may be used in exchange for the assets or securities of another issuer pursuant to a merger)	[]\$	[]\$
Repayment of indebtedness	[]\$	[X]\$
Working capital	[]\$	[x]\$ 1,255.00
Other (specify):	[]\$	
Column Totals	[]\$	[] \$123,745.00
Total Payments Listed (column totals added)	[X] \$ <u>00</u>	[X] <u>\$125,000.00</u>

D. FEDERAL SIGNATURE

The issuer has duly caused this notice to be signed by the undersigned duly authorized person. If this notice is filed under $\frac{8ule}{505}$, the following signature constitutes an undertaking by the issuer to furnish to the U.S. Securities and Exchange Commission, upon written request of its staff, the information furnished by the issuer to any non-accredited investor pursuant to paragraph (b)(2) of $\frac{8ule}{502}$.

Issuer (Print or Type)	Signature Date				
Galactic Gaming, Inc.	James D Willey Che January 50, 2004				
Name of Signer (Print or Type)	Title of Signer (Print or Type)				
James McClay	PRESIDENT				
James Milla	1				
7)	ATTENTION				
Intentional misetatements or on	nissions of fact constitute federal criminal violations. (See 18				
intentional misstatements or on	U.S.C. 1001.)				
	E. STATE SIGNATURE				
Is any party described in 17 CFF disqualification provisions of such	R 230.262 presently subject to any of the Yes No [] [X]				

See App	endix, Column 5, for state response.				
	undertakes to furnish to any state administrator of any state in on Form D (17 CFR 239,500) at such times as required by state				
3. The undersigned issuer hereby request, information furnished by	undertakes to furnish to the state administrators, upon written the issuer to offerees.				
4. The undersigned issuer represents that the issuer is familiar with the conditions that must be satisfied to be entitled to the Uniform limited Offering Exemption (ULOE) of the state in which this notice is filed and understands that the issuer claiming the availability of this exemption has the burden of establishing that these conditions have been satisfied.					
	on and knows the contents to be true and has duly caused this y the undersigned duly authorized person.				
Issuer (Print or Type)	Signature Date:				
Galactic Gaming, Inc.	Signature Date: GALACTIC GAMING THE January 30, 2004				
Name of Signer (Print or Type)	Title (Print or Type)				
James McClay	PRESIDENT				
James Mullay					

Instruction:

4. a. Furnish a statement of all expenses in connection with the issuance and distribution of the securities in this offering. Exclude amounts relating solely to organization expenses of the issuer. The information may be given as subject to future contingencies. If the amount of an expenditure is not known, furnish an estimate and check the box to the left of the estimate.

Transfer Agent's Fees	[X] <u>\$ 7,250.00</u>
Printing and Engraving Costs	[X] <u>\$ 495.00</u>
Legal Fees	[X] <u>\$ 10,227.00</u>
Accounting Fees	[X] \$ <u>22,727.00</u>
Engineering Fees	[] \$None
Sales Commissions (specify finders' fees separately)	[] \$None
Other Expenses (identify) Travel, Consulting and Financial AdviseConsulting	[X] \$83,046.00
Total	[X] <u>\$123,745.00</u>
b. Enter the difference between the aggregate offering price given in response to Part C - Question 1 and total expenses furnished in response to Part C - Question 4.a. This difference is the "adjusted gross proceeds to the issuer."	[x] <u>\$ 1,255.00</u>

5. Indicate below the amount of the adjusted gross proceeds to the issuer used or proposed to be used for each of the purposes shown. If the amount for any purpose is not known, furnish an estimate and check the box to the left of the estimate. The total of the payments listed must equal the adjusted gross proceeds to the issuer set forth in response to Part C - Question 4.b above.

Payments to Officers,

Payments To Others

Print the name and title of the signing representative under his signature for the state portion of this form. One copy of every notice on Form D must be manually signed. Any copies not manually signed must be photocopies of the manually signed copy or bear typed or printed signatures.

APPENDIX

1	Intend to sell to non- accredite investors State (Part B-Ite	and aggregated offering in price offered in	1	Type of investor and amount purchased in State (Part C-Item 2)				5 Disqualification under State ULOE (if yes, attach explanation of waiver granted) (Part E-Item 1)
State	Yes No		Number of Accredited Investors	Amou nt	Number of Non- Accredited Investors	Am oun t	Yes	No
AL	X							
AK	X							
AZ	X							
AR	x							
CA	x							
CO		Common Stock	7	125k	None	-0-	No	x
	•	\$1,000,000						
СТ	x							
DE	x							

DC X

FL X

GA X

ні х

ID X

IL X

IN X

IA X

KS X

KY X

LA X

ME X

MD X

MA X

MI X

MN X

MS X

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NE X

NV X

NH X

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PA X

RI X

sc x

SD X

TN X

TX X

UT X

VT X

VA X

WA X

wv x

wi x

WY X

PR X